STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE
IPSWICH TRIBUNE		10/1/2007
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE $
weekly	52	25-28-30

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)
103 Main Street, PO Box 7, Ipswich, SD 57451-0007

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)
Same

6. FULL NAME OF PUBLISHER: Dwain Gibson

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Dwain Gibson	PO Box 7, Ipswich, SD 57451-0007

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	1000	1093
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	93	96
2. Mail Subscription (Paid and or requested)	666	650
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	759	746
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	0	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	3	3
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	762	749
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	206	305
2. Return from News Agents	32	39
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	1000	1093

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Dwain Gibson
(Signature)

Publisher
(Title)

State of South Dakota)
§
County of Edmunds)

Sworn to before me this 31 day of Dec., 20 07

Jena M Gibson
Notary Public

(Seal)

My commission expires: Feb. 26, 2013

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JAN 02 2008
S.D. SEC. OF STATE

Form: SOS REC 051 7/2004

My Comm. Exp. 2-26-2013

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Dwain Gibson	PO Box 7, Ipswich, SD 57451-0007

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I swear that the statements made by me are true, correct, and complete:

Dwain Gibson
(Signature)

Publisher
(Title)

State of South Dakota)
§
County of Edmunds)

Sworn to before me this 24 day of Oct., 2007

Tena M Gibson
Notary Public

(Seal)

TENA M. GIBSON
Notary Public Seal, South Dakota
My Commission Expires February 26, 2013

My commission expires: Feb. 26, 2013

Form: SOS REC 05 (2007)